PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Con	(Column 2)		TYPE (OR		ENTITY
TOTAL CLAIMS			45		ļ			RATE	FEE	4	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 38 5.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			45 minus 20=		· 25			X\$ 9=		OR	X\$18=	450
INDEPENDENT CLAIMS			3 minus 3 =					X43=		OR	X86≃	_
М	JLTIPLE DEPE	NDENT CLAIM P	ESENT .					+145=		OR	+290=	_
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	1220
(Column 1) (Column 2) (Column 3)							<u>_</u>	SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT,		HIGHI NUME PREVIO PAIDA	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.45	Minus	-4	5_	=		X\$ 9=		OR	X\$18=	/
	Independent	- 3	Minus	are DEALT	CLAIM	:		X43=		OR	X86=	/_
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
\sim	100							TOTAL ADDIT. FEE		OR	TOYAL ADDIT FEE	
CLAIMS HIGHEST (Column 3)												
AMENDMENT B	·	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 45	Minus	-4	5	٥ 🦳	I	X\$ 9=		OR	X\$18=	<u>-</u>
	Independent	• 3	Minus	*** (<u>3</u>	=	Ιſ	X43=		OR	X86=	<u> </u>
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		\	+145=	·	OR	+290≐	<u></u>
								TOTAL		OR .	TOTAL	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
	Total ·	•	Minus	**	·	e '	I	X\$ 9=		OR	X\$18=	
	Independent	•	Minus ·	***		8	1	V42-		ī.		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						·	X43=		OR	X86=	
. • 11	the entry in cohir	nn 1 is less than the	entry in colur	nn 2. write 1	Of in coil	mn 3.	L	+145=		OR	+290=]
* If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR TOTAL ADDIT. FEE OR OR TOTAL ADDIT. FEE												
		ber Previously Paid					foun	d to the app	ropriate box	in colu	mn 1.	